

<b>ORDER FOR SUPPLIES OR SERVICES</b> (Contractor must submit four copies of invoice.)						Form Approved OMB No. 0704-0187 Expires Jun 30, 1997		PAGE 1 OF <b>6</b>					
Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Department of Defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Office of Management and Budget, Paperwork Reduction Project (0704-0187), Washington, DC 20503.													
<b>PLEASE DO NOT RETURN YOUR FORM TO EITHER OF THESE ADDRESSES.</b> <b>SEND YOUR COMPLETED FORM TO THE PROCUREMENT OFFICIAL IDENTIFIED IN ITEM 6.</b>													
1. CONTRACT/PURCH ORDER NO. <b>DAAE07-98-G-T001</b>			2. DELIVERY ORDER NO. <b>UB7Y</b>		3. DATE OF ORDER (YYMMDD) <b>2004 JUL 08</b>		4. REQUISITION/PURCH REQUEST NO. <b>YPC04161000570</b>		5. PRIORITY <b>DOA4</b>				
6. ISSUED BY <b>Defense Supply Center Columbus P.O. Box 3990 Columbus, OH 43218-3990 Local Administrator: PLLXCBU (614)692-1263 / FAX: (614)693-1620 E-mail: Charlene.Nesbitt@dla.mil</b>			CODE <b>SP0700</b>		7. ADMINISTERED BY (If other than 6) <b>DCMA INDIANAPOLIS EMMETT J BEAN CENTER 8899 EAST 56TH STREET INDIANAPOLIS IN 46249-5701</b>			CODE <b>S1501A</b>		8. DELIVERY FOB <input type="checkbox"/> DEST <input checked="" type="checkbox"/> OTHER (See Schedule if other)			
9. CONTRACTOR <b>ALLISON TRANSMISSION GENERAL MOTORS CORP. 4700 WEST 10TH STREET INDIANAPOLIS IN 46222-3277</b>			CODE <b>73342</b>		FACILITY CODE		10. DELIVER TO FOB POINT BY (Date) (YYMMDD) <b>See Schedule</b>		11. MARK IF BUSINESS IS <input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMEN-OWNED				
NAME AND ADDRESS							12. DISCOUNT TERMS <b>NET 30 days</b>		13. MAIL INVOICES TO <b>See Block 15</b>				
14. SHIP TO <b>See Schedule - Do Not Ship to Address in Block 6</b>			CODE		15. PAYMENT WILL BE MADE BY <b>ATTN DFAS CO BVDPC/CC CONSTRUCTIO 3990 E BROAD ST PO BOX 182317 COLUMBUS OH 43218-6203</b>			CODE <b>S33181</b>		MARK ALL PACKAGES AND PAPERS WITH CONTRACT OR ORDER NUMBER			
16. TYPE OF ORDER			DELIVERY <input checked="" type="checkbox"/>		This delivery order is issued on another Government agency or in accordance with and subject to terms and conditions of above numbered contract.								
			PURCHASE		Reference your <b>offer dated 2004 JUN 25, 04161000570</b> and furnish the following on terms specified herein.								
ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.													
NAME OF CONTRACTOR _____ SIGNATURE _____ TYPED NAME AND TITLE _____ DATE SIGNED (YYMMDD) _____ <input type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:													
17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE  <b>CG: 97X4930 5CC0 001 26.0 S33150</b>													
18. ITEM NO.		19. SCHEDULE OF SUPPLIES/SERVICE				20. QUANTITY ORDERED/ACCEPTED*		21. UNIT		22. UNIT PRICE		23. AMOUNT	
		<b>Remarks: ACCELERATED DELIVERY IS ACCEPTABLE AND DESIRED AT NO COST TO THE GOVERNMENT.</b>				<b>TOTAL: 265</b>							
* If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle.					24. UNITED STATES OF AMERICA <b>Julia M. Lewis</b> <b>PLLEBC1</b>					25. TOTAL <b>\$ 57033.30</b>			
BY: <i>Julia M Lewis</i>					TRACTING/ORDERING OFFICER					29. DIFFERENCE			
26. QUANTITY IN COLUMN 20 HAS BEEN <input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO THE CONTRACT EXCEPT AS NOTED					30. INITIALS								
DATE _____ SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE _____					31. PAYMENT <input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL					32. PAID BY		33. AMOUNT VERIFIED CORRECT FOR	
36. I certify this account is correct and proper for payment. DATE _____ SIGNATURE AND TITLE OF CERTIFYING OFFICER _____										34. CHECK NUMBER		35. BILL OF LADING NO.	
37. RECEIVED AT		38. RECEIVED BY (Print)		39. DATE RECEIVED (YYMMDD)		40. TOTAL CONTAINERS		41. S/R ACCOUNT NUMBER		42. S/R VOUCHER NO.			

## SECTION B

PR YPC04161000570  
NSN 2520-01-251-4395

## ITEM DESCRIPTION:

RING, EXTERNAL SPLINE.

"CLASS I OZONE DEPLETING CHEMICALS ARE NOT TO BE USED NOR INCORPORATED IN ANY ITEMS TO BE DELIVERED UNDER THIS CONTRACT. THIS PROHIBITION SUPERSEDES ALL SPECIFICATION REQUIREMENTS BUT DOES NOT ALLEVIATE ANY PRODUCT REQUIREMENTS. SUBSTITUTE CHEMICALS MUST BE SUBMITTED FOR APPROVAL UNLESS THEY ARE AUTHORIZED BY THE SPECIFICATION REQUIREMENTS."

THE INTERNATIONAL ORGANIZATION FOR STANDARDIZATION (ISO) 9002 OR A "TAILORED" PROGRAM MEETING THE FOLLOWING ISO 9002 PARAGRAPHS APPLIES:

4.5, DOCUMENT CONTROL: LIMITED TO INSPECTION AND TESTING AS WELL AS APPLICABLE DRAWINGS, SPECIFICATIONS AND INSTRUCTIONS REQUIRED BY CONTRACT  
4.6, PURCHASING: 4.6.1 AND LIMITED TO 4.6.2 A) AND 4.6.4.2, ALL OTHER PARTS OF PARAGRAPH ARE HEREBY DELETED  
4.7, CUSTOMER-SUPPLIED PRODUCT:  
4.8, PRODUCT IDENTIFICATION & TRACEABILITY:  
4.10, INSPECTION & TESTING:  
4.11, INSPECTION, MEASURING & TEST EQUIPMENT:  
4.12, INSPECTION AND TEST STATUS:  
4.13, CONTROL OF NONCONFORMING PRODUCT:  
4.14, CORRECTIVE AND PREVENTIVE ACTION:  
PARAGRAPH 4.14.3 APPLY TO PRODUCT ONLY  
4.16, QUALITY RECORDS:  
FAR CLAUSE 52.246-11 APPLIES

IF AQLS ARE LISTED IN THE SPECIFICATION(S) OR DRAWING(S) THEY MAY BE USED TO ESTABLISH THE AUTHORIZED SAMPLE SIZE, HOWEVER, THE ACCEPTANCE NUMBER FOR THIS CONTRACT IS ZERO; I.E., THIS CONTRACT REQUIRES A SAMPLING PLAN THAT ACCEPTS ON ZERO DEFECTS AND REJECTS ON ONE OR MORE DEFECT(S).

DLAD CLAUSE 52.246-9004, PRODUCT VERIFICATION TESTING, IS HEREBY INCORPORATED, AND MAY BE INVOKED AT THE DISCRETION OF THE PROCUREMENT ACTIVITY.

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## CONTINUATION SHEET

Order Number:

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## SECTION B

I/A/W DRAWING NR 19207 11650255  
BASIC DTD 85 APR 10  
AMEND NR C DTD 88 JAN 01  
TYPE NUMBER: 11650255  
"DETAILED DRAWING (ONE ITEM)"

I/A/W DRAWING NR 19207 11650265  
REFNO DTD 87 JAN 11  
AMEND NR DTD  
TYPE NUMBER:  
"DETAILED DRAWING (ONE ITEM)"

I/A/W DRAWING NR 19207 8355700  
REFNO DTD 62 FEB 02  
AMEND NR G DTD 84 JAN 31  
TYPE NUMBER:  
SPECIFICATION

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001AA	YPC04161000570	0001	150	EA	<u>\$215.22000</u>	<u>\$32283.00</u>

QTY VARIANCE: PLUS 0% MINUS 0%  
INSPECTION POINT: ORIGIN  
ACCEPTANCE POINT: ORIGIN

DELIVERY FOB: ORIGIN BY: 2004 DEC 05

<u>ITEM</u>	<u>PR</u>	<u>PRLI</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT PRICE</u>	<u>AMOUNT</u>
0001AB	YPC04161000570	0001	115	EA	<u>\$215.22000</u>	<u>\$24750.30</u>

QTY VARIANCE: PLUS 0% MINUS 0%  
INSPECTION POINT: ORIGIN  
ACCEPTANCE POINT: ORIGIN

DELIVERY FOB: ORIGIN BY: 2005 JAN 04

PREP FOR DELIVERY

PKGING DATA - MIL-STD-2073-1D, 15 DEC 1999  
QUP = 001: PRES MTHD = ZZ: CLNG/DRY = X: PRESV MAT = XX:  
WRAP MAT = XX: CUSH/DUNN MAT = XX: CUSH/DUNN THKNESS = X:  
UNIT CONT = XX: OPI = 0:  
INTRMDTE CONT = XX: INTRMDTE CONT QTY = XXX:  
PACK CODE = U:  
MARKING SHALL BE IN ACCORDANCE WITH MIL-STD-129.  
SPECIAL MARKING CODE: 00 - NO SPECIAL MARKING.  
PALLETIZATION SHALL BE IN ACCORDANCE WITH DC1636P001 REV E

CONTINUED ON NEXT PAGE

## SECTION B

DATED 3029

SUPPLEMENTAL INSTRUCTIONS

PRESERVATION AND PACKAGING SHALL BE  
IAW ASTM-D3951, COMMERCIAL PACKAGING.

For all shipments of packaged materiel to the government, which includes either depot (DLA-direct) or DVD (customer-direct) shipments, both DoD linear and 2-D bar code markings are required on military shipping labels in accordance with MIL-STD-129, revision P, dated December 15, 2002, as amended by Change Notice 1, dated January 15, 2004. 2-D bar coding shall be in accordance with ISO/IEC 15438, ISO/IEC 15434 (ANSI MH10.8.3) and DoD 4500.9-R. MSL linear (code 3 of 9 or code 39) bar coding shall be in accordance with ISO/IEC 16388. MSL label stock quality shall meet MIL-PRF-61002. MSL bar code print quality shall meet ANSI MH10.8-2000 or ANSI X3.182-1990 (R2000) for applicable 2-D and/or linear bar codes. All DVD shipments shall meet additional linear bar coding requirements in DLAD 52.211-9008. When the contract/order omits any data element required to be bar-coded, the field shall be zero-filled. These requirements do not apply to delivery orders when the basic contract has not been modified to require MIL-STD-129P. If there are inconsistencies between the schedule and MIL-STD-129P, the schedule takes precedence.

## PARCEL POST ADDRESS:

W25G1U  
XU TRANSPORTATION OFFICER  
DDSP NEW CUMBERLAND FACILITY  
BUILDING MISSION DOOR 113 134  
NEW CUMBERLAND PA 17070-5001

## FREIGHT SHIPPING ADDRESS:

W25G1U  
TRANSPORTATION OFFICER  
DDSP NEW CUMBERLAND FACILITY  
BUILDING MISSION DOOR 113-134  
NEW CUMBERLAND PA 17070-5001

CONTINUED ON NEXT PAGE

SECTION B

NON-MILSTRIP  
PROJ

\* \* \* \* \*

REMIT PAYMENT TO:

\* \* \* \* \*

CONTINUED ON NEXT PAGE

CONTINUATION SHEET		Order Number: DAAE07-98-G-T001-UB7Y	PAGE OF PAGES 6 6
A04D01 52.204-9C06 DSCC Part 52 - SOLICITATION PROVISIONS AND CONTRACT CLAUSES STATEMENT (JUL 2004)		(Vendor Fill-in)	
Full text of all DLAD/DSCC clauses listed within this individual solicitation are contained in the DSCC Part 52 - Solicitation Provisions and Contract Clauses, current version found at http://dibbs.dscclia.mil/refs/provclauses . Also, the full text of FAR/DFARS clauses incorporated by reference may be accessed electronically at http://www.dla.mil/j-3/j-336/icps.htm The clauses/provisions incorporated by reference have the same force and effect as if they were in full text; however, those having no bearing on the instant acquisition become self-deleting. In the event of an inconsistency between text found in DSCC Part 52 and the individual solicitation/award, the provision of the individual solicitation/award shall govern.		Applicable to CLIN(s): (Vendor Fill-in)	
SECTION B		PACKAGING (x)(Vendor Fill-in) Same as Offeror	
Basic Ordering Agreement or Contract Effective Dates 08/24/98 through 09/25/04 .		Applicable to CLIN(s): (Vendor Fill-in)	
( ) Price List No. dated **/**/** .		( ) (Vendor Fill-in) Same as above	
(x) Quote/Ref. No. 20005532 (04161000570) dated 06/25/04 .		( ) (Vendor Fill-in) Other (CAGE, Name, Street Address, City, State and Zip Code)	
(x) FOB Origin - Clin(s) All		(Vendor Fill-in)	
(x) FOB Origin Shipping Point: Indianapolis IN		(Vendor Fill-in)	
( ) FOB Destination - Clin(s)		(Vendor Fill-in)	
( ) PAS Serial No.		Applicable to CLIN(s): (Vendor Fill-in)	
( ) NIB/NISH Allocation No.		E46D02 52.246-9C02 ACCEPTANCE AT ORIGIN (NOV 1995) DSCC	
(x) Firm Fixed Price		E46D33 52.246-9C44 HIGHER-LEVEL CONTRACT QUALITY REQUIREMENT (TAILORED ISO 9002) (FEB 1999) DSCC	
( ) Firm Fixed Price w/EPA		SECTION F	
SECTION D		F47D01 52.247-9C02 SHIPPING INSTRUCTIONS (DOMESTIC) (MAY 2002) DSCC	
D11D04 52.211-9C17 PACKING LIST/INVOICE/SHIPPING DOCUMENTS (JUL 2000) DSCC			
SECTION E			
E46A02 52.246-2 INSPECTION OF SUPPLIES--FIXED-PRICE (AUG 1996) FAR			
E46A17 52.246-15 CERTIFICATE OF CONFORMANCE (APR 1984) FAR			
E46B01 252.246-7000 MATERIAL INSPECTION AND RECEIVING REPORT (MAR 2003) DFARS			
E46C03 52.246-9004 PRODUCT VERIFICATION TESTING (JUN 1998) DLAD			
E46D00 52.246-9C00 ADDENDUM TO DFARS 252.246-7000, MATERIAL INSPECTION AND RECEIVING REPORT			
When submitting a Material Inspection and Receiving Report, DD Form 250, electronically through Wide Area Workflow (WAWF-RA), contractors must print and provide a copy of hte DD Form 250 with the material shipment.			
E46D01 52.246-9C01 INSPECTION AT ORIGIN (JUN 2001) DSCC			
(c) Inspection Points:			
SUPPLIES (x)(Vendor Fill-in) Same as Offeror			
Applicable to CLIN(s): All (Vendor Fill-in)			
( ) (Vendor Fill-in) Other (CAGE, Name, Street Address, City, State and Zip Code)			
		(Vendor Fill-in)	
		(Vendor Fill-in)	